

CAED 435 (Rev. 1/14)		United States District Court, Eastern District of California		Case 1:21-cr-00022-NONE-SKO Document 22 Filed 05/07/21 Page 1 of 1		FOR COURT USE ONLY DUE DATE:	
TRANSCRIPT ORDER							
You must provide the name of the Reporter.							
1. NAME Brian Enos		2. EMAIL brian.enos@usdoj.gov		3. PHONE NUMBER 559/497-4000		4. DATE 5-07-2021	
5. MAILING ADDRESS 2500 Tulare St. Ste. 4400				6. CITY Fresno		7. STATE CA	
9. CASE NUMBER 1:21-cr-00022-NONE-SKO		10. JUDGE SKO		8. ZIP CODE 93721			
13. CASE NAME US v Larson				DATES OF PROCEEDINGS			
				11. FROM 2-25-2021		12. TO 4-30-2021	
16. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> NON-APPEAL				LOCATION OF PROCEEDINGS			
				14. CITY Fresno		15. STATE CA	
<input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> CIVIL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> BANKRUPTCY <input type="checkbox"/> OTHER (<i>Specify</i>)							
17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)							
PORTION(S)		DATE(S)		REPORTER			
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)			
<input type="checkbox"/> ENTIRE TRIAL							
<input type="checkbox"/> SENTENCING				Status Conference		4-30-2021 Karen Hooven	
<input type="checkbox"/> MOTION HEARING				<input checked="" type="checkbox"/> OTHER (Specify)			
<input type="checkbox"/> STATUS HEARING				Arraignment and Detention Hearing		2-25-2021 Karen Hooven	
<input type="checkbox"/> CHANGE OF PLEA				Status Conference		4-21-2021 Karen Hooven	
<input type="checkbox"/> PRE-TRIAL PROCEEDING				Commencement of Faretta Hearing		4-28-2021 Kimberly Bennett	
18. ORDER							
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS	
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
EXPEDITED	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES				
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>					
CERTIFICATION (19 & 20) By signing below, I certify I will pay all charges (deposit plus additional).				ESTIMATE TOTAL			
19. SIGNATURE /s/ Brian W. Enos				PROCESSED BY			
20. DATE 5/07/2021				PHONE NUMBER			
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS			
ORDER RECEIVED		DATE	BY				
DEPOSIT PAID				DEPOSIT PAID			
TRANSCRIPT ORDERED				TOTAL CHARGES			
TRANSCRIPT RECEIVED				LESS DEPOSIT			
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED			
PARTY RECEIVED TRANSCRIPT				TOTAL DUE			